EIPP COMPREHENSIVE HEALTH ASSESSMENT (CHA): Postpartum

Date:	ID Number:			Inc	dicate CHA (circle one):	Initial	2 Month 4 Month	8 Month 12	2 Month
Last Name:			First Name:				DOB:	Age:	
Street Address:				City	y:	State:	<u>MA</u> Zip Code: _		
Mailing Address: _				City	y:	State:	MA_ Zip Code: _		
Phone Number:				Alte	ernate Contact:				
OB/GYN Name:		OE	B/GYN Phone Nเ	ımber	: Prenata	al Care I	Began (circle one): 1 ^s	2 nd 3 rd	# Prenatal Visits:
OVERALL LEVE	L OF STRENGTH:								
	USE CLINICA	AL JUDGE	MENT BASED (ON AS	SSESSMENT OF INDICA	TORS A	AND COPING STRATE	GIES USED	
Overall Level of Strength	Unable to Assess		1 (low)			2 (mod	derate)		3 (high)
PROBLEM LIST:									
	Problem		Date Identific	ed		Ac	tions Taken		Date Resolved
INFANT & POST	PARTUM INFORMA	TION							
Baby's Name:		Ва	aby's DOB:		Baby's Birth weight	:	Baby's Gend	ler (circle one):	M/F
Type of Delivery:		c	omplications?						
Pediatrician's Name:				Pedia	trician's Phone Number: _				
Did Mother attend Po	ost Partum Visit (circle o	ne): Yes/N	lo Date of Visit:		Number of We	ek's Pos	stpartum:		
Breastfeeding at Birt	th (circle one): Yes / No	If No*:	Breastfe	eding	at 6 Months (circle one):	Yes / No	o If No#:		
Immunizations	НерВ: 1 2	3	Dtap: 1	2	3 Hib: 1	2	3 IPV 1	2	3
*Reasons at birth: (1=	Not enough Milk) (2=Breas	st related Pi	oblems) (3 = medic	al rea	sons) (4=Personal Reasons)	(5=Form	nula More convenient) (6=	Return to work, s	chool, or separation) (7 =

*Reasons at birth: (1=Not enough Milk) (2=Breast related Problems) (3 = medical reasons) (4=Personal Reasons) (5=Formula More convenient) (6=Return to work, school, or separation) (7 = Other) (8 = Unknown)

#Reasons at 6 Months: (1=Not enough Milk) (2=Breast related Problems) (3 = medical reasons) (4=Personal Reasons) (5=Formula More convenient) (6=Return to work, school, or separation) (7=Baby weaned self/nursing strike/biting) (8 = Poor Weight Gain) (9=Baby too hungry) (10=other) (11=Unknown)

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HOUSEHOLD COMPOSITION:

Name	Gender	# weeks Pregnant	Due Date	Plan to BF?	Age	DOB	Relation	Living in Home?	English?	Concerns
	F						Self	Yes		

		1	d Utilization of Care				
Level of Strength							
Indicators	Unable to Assess	1 (low)	2 (moderate)	3 (high)			
1a: Housing	Unable to Assess	 Repeated Hx /current homelessness At risk of eviction No working phone 	 Hx/at risk of homelessness Owes back rent, fuel & utilities Phone recently disconnected 	 Hx of maintaining stable housing Fuel/Utilities on, paid, & functioning long term Working telephone available 			
1b: Health	Unable to Assess	 No health insurance No access to medical or dental care 	 Healthy Start or Free Care At risk of losing health insurance Some barriers to accessing medical and/or dental care 	 MassHealth or private insurance Receives medical home with regular care Receives regular dental care 			
1c: Education	Unable to Assess	Less than 10 th grade education Unable to set educational or career goals	 High school diploma or GED Sets and pursues short term educational and career goals 	College or advanced degree Sets and pursues long tem educational and career goals			
1d: Economics	Unable to Assess	 No or minimal income FOB not contributing financially Loss of job/school due to pregnancy No child care available No transportation Unable to prioritize or budget 	 Unable to meet all basic financial needs FOB inconsistently contributes financially Job/school threatened by pregnancy Sporadic child care available Sporadic transportation available Needs assistance budget/prioritizing 	 Adequate income for living expenses FOB contributes financially Job/school accommodating pregnancy Adequate child care available Reliable transportation available Able to budget and prioritize 			
1e: Community Support	Unable to Assess	 No culturally & linguistically appropriate information about community resources and services available Overwhelmed and immobilized Unable to access services No social supports and isolated 	 Limited culturally & linguistically appropriate information about community resources and services available Hx of difficulty in accessing services Limited friends and family in area are supportive/ helpful when needed 	 Has culturally & linguistically appropriate information about community resources and services available Hx of success in accessing services Friends and family in area are supportive and helpful when needed 			
	USE C	LINICAL JUDGEMENT BASED ON ASSESSME	NT OF INDICATORS AND COPING STRATEGIE	SUSED			
Overall Access and Utilization of Care Level of Strength	Unable to Assess	1 (low)	2 (moderate)	3 (high)			

		KAA#2: W	omen's Health	
		Level o	of Strength	
Indicators	Unable to Assess	1 (low)	2 (moderate)	3 (high)
2a: Family Planning	Unable to Assess	 No knowledge of BCM Never used/no plan for BCM Unplanned pregnancy Recent STI Unable to negotiate BCM w/ partner 	 Verbalizes BCM options Used BCM in past Unplanned pregnancy Hx of STI Conflict with partner on BCM use 	 Success with BCM Planned pregnancy No Hx of STIs Partner supportive of BCM
2b: STI's/HIV	Unable to Assess	Never practices safer sexHigh risk for STI	Usually practices safer sexModerate risk for STI	Practices safer sexLow risk for STIs
2c: Reproductive Health	Unable to Assess	 Inadequate PNC No PP appointment No knowledge of normal maternal physical changes in 1st year of parenthood 	 Adequate PNC PP appt scheduled Some knowledge of normal maternal physical changes in first year of parenthood 	 Adequate PNC Keeps PP appointments Knowledgeable of normal maternal physical changes in first year of parenthood
2d: Other Women's Health Concerns	Unable to Assess	No knowledge of health concerns PCP not identified Inadequate Hx of physical exam with screenings	Some knowledge of health concerns Identifies PCP Irregular Hx of physical exams with screenings	 Understands health concerns Identifies PCP Annual physical exam with screenings-knows results
	USE C	CLINICAL JUDGEMENT BASED ON ASSESSM	ENT OF INDICATORS AND COPING STRATEG	GIES USED
Overall Women's Health Level of Strength	Unable to Assess	1 (low)	2 (moderate)	3 (high)

			Oral Health Strength	
Indicators	Unable to Assess	1 (low)	2 (moderate)	3 (high)
3a: Mom's Oral Health	Unable to Assess	Never received dental care No cleaning during pregnancy Irregular brushing Does not use floss No Fluoride	 Irregular dental care No cleaning during pregnancy Brushes daily Irregular floss Occasional fluoride in diet 	 Regular dental care Cleaning during pregnancy Brushes at least 2x day Flosses 1x a day Fluoride in diet
3b: Baby (Newborn to 6 months) oral health	Unable to Assess	 Bottle propping observed Gums are not cleaned No fluoride in diet Verbalizes lack of knowledge of role of fluoride and strong teeth 	 May bottle prop occasionally Gums cleaned irregularly Occasional fluoride in diet Verbalizes some knowledge of role of fluoride in making strong teeth. 	 No bottle propping Gums are cleaned daily Fluoride in diet Verbalizes role of fluoride in making strong teeth
3c: Baby (6-12 months) oral health	Unable to Assess	 Gums and teeth are not cleaned Sippee cup not introduced at 6 mth Baby walking around with bottle No knowledge of bottle weaning at 12-14 months 	 Gums and teeth cleaned irregularly Sippee cup introduced after 6 mths Baby walk with bottle occasionally Some knowledge of benefits of bottle weaning at 12-14 months 	 Cleans baby's gums or teeth daily Sippee cup introduced at six months Baby does not walk with bottle Verbalizes benefits of bottle weaning at 12-14 months
	USE C	LINICAL JUDGEMENT BASED ON ASSESSME	NT OF INDICATORS AND COPING STRATEGI	ES USED
Overall Oral Health Level of Strength	Unable to Assess	1 (low)	2 (moderate)	3 (high)

		KAA#4:	Nutrition				
Level of Strength							
Indicators	Unable to Assess	1 (low)	2 (moderate)	3 (high)			
4a: Maternal Nutrition and Weight Gain	Unable to Assess	BMI Lacks food representing most of the food groups for meeting families needs Major barriers to securing, preparing, and/or feeding infant healthy foods	BMI May lack food representing some of the food groups for meeting families needs Some barriers to securing, preparing, and/or feeding infant healthy foods	 BMI Adequate food representing all food groups for meeting families needs No barriers to securing, preparing, and/or feeding infant healthy foods 			
4b: Infant Nutrition and fluid intake	Unable to Assess	Major concerns for infant weight loss/gain Inadequate response to feeding cues Infant brought to ER or Pedi for dehydration Does not show proper preparation or storage of breastmilk or formula No knowledge of impact of infant growth spurts on feeding and sleeping patterns	Some concerns for infant weight loss/gain Inconsistent response to feeding cues Willing to learn S+Sof dehydration and # of wet diapers Some knowledge of how to store breastmilk or formula Some knowledge of impact of infant growth spurts on feeding/ sleeping	 Adequate infant weight gain (4-6 oz/wk) Adequately responds to feeding cues Knows proper hydration (4-8 wet diapers/day) Knows proper preparation and storage of breastmilk or formula Knowledge of impact of infant growth spurts on feeding and sleeping patterns 			
	USE C	LINICAL JUDGEMENT BASED ON ASSESSME	NT OF INDICATORS AND COPING STRATEGIE	ES USED			
Overall Nutrition Level of Strength	Unable to Assess	1 (low)	2 (moderate)	3 (high)			

		KAA#5: B	reastfeeding	
		Level of	f Strength	
Indicators	Unable to Assess	1 (low)	2 (moderate)	3 (high)
5a: Breastfeeding	Unable to Assess	 Barriers to accessing social or cultural support for breastfeeding Lack of knowledge of breast care 	 Some barriers to accessing social or cultural supports for breastfeeding Some knowledge of breast care 	 No Barriers to accessing social or cultural supports for breastfeeding (LaLeche) Knowledge of breast care and S+S of infection
	USE C	LINICAL JUDGEMENT BASED ON ASSESSME	NT OF INDICATORS AND COPING STRATEGIE	ES USED
Overall Breastfeeding Level of Strength	Unable to Assess	1 (low)	2 (moderate)	3 (high)
Additional Commen	ts:			

	KAA#6: Physical Activity						
		Level of	Strength				
Indicators	Unable to Assess	1 (low)	2 (moderate)	3 (high)			
6a: Maternal Physical Activity	Unable to Assess	 Lack of knowledge of importance of physical activity for self/ family. Lack of knowledge of interrelationship between diet and physical activity. No regular physical activity, physician approves activity. Watches television more than 2 hours a day. No help for physical condition Has not lost pregnancy weight 	 Some knowledge of importance of physical activity for self/family. Some knowledge of interrelationship between diet and physical activity. Sporadic physical activity upon physician approval. Watches television about 2 hours a day Some help for physical condition Lost 50% of pregnancy weight 	 Knowledge of importance of physical activity for self/family. Knowledge of interrelationship between diet and physical activity. Participates in regular physical activity upon physician approval. Watches television less than 2 hours a day. Adequate help for physical condition Has lost pregnancy weight 			

6b: Baby Physical Activity	Unable to Assess	Does not create safe environment and does not encourage activities which facilitate the development of childhood motor skills Lacks knowledge of role of physical activity in facilitating healthy weight, growth and development CLINICAL JUDGEMENT BASED ON ASSESSME	Working to create safe environment and encourages activities which facilitate the development of childhood motor skills Some knowledge of role of physical activity in facilitating healthy weight, growth and development ENT OF INDICATORS AND COPING STRATEGIE	Creates safe environment and encourages activities which facilitate the development of childhood motor skills Understands role of physical activity in facilitating healthy weight, growth and development ES USED
Overall Physical Activity Level of Strength	Unable to Assess	1 (low)	2 (moderate)	3 (high)
Additional Commen	ts:			

		•	ve and Perceptual	
Indicators	Unable to Assess	1 (low)	Strength 2 (moderate)	3 (high)
7a: Cognitive and Perceptual	Unable to Assess	 Limited cognitive and perceptual abilities; difficulty understanding and using new information. Unable to verbalize methods of learning that are most effective for her. Verbalizes/demonstrates no confidence in problem solving abilities; unable to describe rationale behind decisions made 	 May have limited cognitive and perceptual abilities; able to understand and use new information. Verbalizes some methods of learning that are most effective for her. Verbalizes/demonstrates some confidence in problem solving abilities; able to describe rationale behind decisions made. 	 Adequate cognitive and perceptual abilities; able to understand and use new information. Verbalizes methods of learning that are most effective for her. Verbalizes/demonstrates confidence in problem solving abilities/able to describe rationale behind decisions made.
	USE (LINICAL JUDGEMENT BASED ON ASSESSME	NT OF INDICATORS AND COPING STRATEGIE	S USED
Overall Cognitive and Perceptual Level of Strength	Unable to Assess	1 (low)	2 (moderate)	3 (high)
Additional Commer	its:			

		KAA#8: Environmer	ntal Health and Safety						
	Level of Strength								
Indicators	Unable to Assess	1 (low)	2 (moderate)	3 (high)					
8a: Lead Poisoning	Unable to Assess	 Lead in environment Denies dangers of lead poisoning and precautions not taken Unable or unwilling to access annual lead testing of children 	 Concern for lead in environment Verbalizes some of the dangers of lead poisoning and some precautions are taken Some barriers or has not accessed annual lead testing of children 	 Lead free environment Verbalizes the dangers of lead poisoning and precautions are taken Knows need for annual lead testing of children to the age of four. 					
8b: Asthma	Unable to Assess	Asthmatic child present in home and asthma not controlled Unable to verbalize triggers of asthma including molds, pet dander, dust mites, second hand smoke, and cockroaches Precautions not taken	 Asthmatic child present in home and asthma somewhat controlled Verbalizes some of the triggers of asthma including molds, pet dander, dust mites, second hand smoke, and cockroaches Some precautions taken 	No asthmatic child present in home or present with asthma in control Verbalizes the triggers of asthma including molds, pet dander, dust mites, second hand smoke, and cockroaches Precautions are taken					

Overall Environmental Health and Safety Level of Strength	Unable to Assess	1 (low)	2 (moderate)	3 (high)
	USE	CLINICAL JUDGEMENT BASED ON ASSESSME	NT OF INDICATORS AND COPING STRATEGIE	S USED
8e: Occupational Hazards	Unable to Assess	 Exposed to occupational hazards Precautions not taken 	 Some knowledge of occupational hazards Precautions taken inconsistently 	 No exposure to occupational hazards Precautions taken
8d: Housing	Unable to Assess	 Major safety concerns with housing exists (i.e. fire, mold, animals) Neighborhood unsafe No smoke detectors in place or functioning 	 Some safety concerns with housing exist Some concerns for safety of neighborhood Some smoke detectors in place and functioning 	 No major safety concerns with housing Neighborhood is safe Smoke detectors are in place and functioning
8c: Injury Prevention	Unable to Assess	 Parent does not know basic First Aid/CPR Emergency numbers not available Does not use seat belt Does not verbalize knowledge of car seat safety and does not plan or cannot obtain approved car seat Does not verbalize knowledge of major childhood injury risks and does not practice prevention Does not verbalize knowledge of common safety hazards in home and does not practice prevention Does not use appropriate handwashing Weapons present and not secured 	 Parent learning basic First Aid/CPR Some emergency numbers available Inconsistent use of seat belt Learning car seat safety and experiences some barriers in obtaining approved car seat Verbalizes some knowledge of major childhood injury risks and inconsistently practices prevention Verbalizes some knowledge of common safety hazards in home and inconsistently practices prevention Inconsistent handwashing Weapons present but secured appropriately 	 Parent knows basic First Aid/CPR Emergency numbers available including poison control Consistent use of seat belt Verbalizes car seat safety and plans to obtain approved car seat Verbalizes knowledge of major childhood injury risks and consistently practices prevention Verbalizes knowledge of common safety hazards in home and consistently practices prevention Consistent, appropriate handwashing Weapons not present

		KAA#9: Alcohol, Tobac	cco, and Other Drugs				
		Level of S	Strength				
Screening Tool: 5	P's Screening Tool and	d Intervention:	A Brief Intervention:				
 Did any of your 	Parents have a problem	with alcohol or other drug use?	ASK: Screen using the 5 P's				
		blems with alcohol or other drug use?	ASSESS: Is there a current pro	blem? If so, how severe?			
Does your Part	ner have a problem with	alcohol or drug use?	ADVISE: Recommend abstaining				
 Beforé vou wer 	e pregnant did you have	a problem with alcohol or drug use? (Past)		eaction using Motivational Interviewing			
		er, wine or liquor, or used other drugs? (Preg		rials to patient as needed. Refer to			
	KED any cigarettes in the			or further assessment if necessary.			
		gests further assessment and brief interven					
Indicators	Unable to Assess	1 (low)					
		Positive screen, client use	 Positive screen for Peers, Partners, 	Negative Screen			
9a: A/OD Screen	Unable to Assess	 Use significantly impacts family 	Past- client has no current use				
		functioning or precipitating family crisis	 Family use mildly impacts family 				
			functioning				
		 Mother smokes 	 Hx of smoking 	 No Hx of smoking 			
9b: Tobacco	Unable to Assess	 Smoking in home exposure to second 	 Smokers in home smoke outside of the 	No use in home			
		hand smoke	home				
	USE CLI	NICAL JUDGEMENT BASED ON ASSESSMEN	TOF INDICATORS AND COPING STRATEGIES	SUSED			
Overall ATOD							
Level of Strength	Unable to Assess	1 (low)	2 (moderate) 3 (high)				

KAA#10: Violence Level of Strength

Initial DV Screening Questions:

- Have you ever felt afraid or unsafe with a boyfriend/partner/husband?
- Has a current or former partner ever hit, kicked, choked, or threatened you?
- Has a boyfriend/partner/husband ever tried to control you?
- Have you ever had any kind of unwanted or forced sexual contact?
- Are you feeling at all unsafe in any way in your relationship currently?

Additional Assessment if above questions answered positively:

- If feels unsafe Can you tell me more about what is making you feel unsafe?
- If current violence Has the violence increased or become more severe recently?
- Will you be safe when he/she comes home today?
- Do you feel you need immediate intervention?

Intervention:

- Educate/support
- Thank her for disclosure
- Articulate concern for safety and well-being
- Offer referral/resources
- Follow-up soon
- Develop safety plan if appropriate, consult with DV Advocate at SAFELINK 877-785-2020

Assess child safety – file 51A if needed, consult with DSS DV Unit at 617-748-2335

Do you loor yo	d ficoa illimitodiato ilitori	Citabii.	500 5V 6111t at 617 140 2000				
Indicators	Unable to Assess	1 (low)	2 (moderate)	3 (high)			
10a: Interpersonal and Family Violence	Unable to Assess	 IPV endangering safety of family Positive screen within one year Current abuse 	 Positive IPV screen > one year ago and no current risk No Hx of IPV with current partner Does not interfere with family functioning 	Negative IPV screen			
10b: Child Abuse and Neglect	Unable to Assess	Children have been or will be placed outside home No communication or contact between one or both parents and child/ren Open conflict between parents Children have witnessed IPV Parents unable to distinguish between discipline and abuse Current DSS involvement	 Children may show some aggression or behavioral issues Parents may have tense relationship but address conflict productively Parents question ability to set limits consistently and provide structure. Hx of abuse but have received professional help. Hx of DSS involvement but resolved 	 Children live with one or both parents in stable family Parents/partners communicate well with each other and with children Children appear happy and well-adjusted Parents confident in setting limits No Hx of abuse/neglect No Hx of DSS involvement 			
	USE CI	LINICAL JUDGEMENT BASED ON ASSESSMEI	NT OF INDICATORS AND COPING STRATEGIES	S USED			
Overall Violence Level of Strength	Unable to Assess	1 (low)	2 (moderate)	3 (high)			
Additional Commen	its:						

KAA#11: Emotional Health								
Level of Strength								
Emotional Health Screeni			Full Screen if >3:					
		been bothered by the following problems?	 Functional impairment: Have these pro 	oblems made it difficult for you to do your				
0=Not at All 1=Several Day	ys 2=More than	half the days 3=Nearly every day	work, take care of things at home, or g	get along with other people? Yes No				
Had little interest or ple	easure in doing t	hings? 0 1 2 3	2. Major new life stressors? Yes No					
2. Feeling down, depress	sed or hopeless?	0 1 2 3	3. Previous Hx of depression emotional health concerns? Yes No					
3. Feeling scared or panie			4. Current treatment for depression/MH condition? Yes No					
4. TOTAL SCORE	•	If Score > 3, Full Screen Required	5. Thoughts of being better off dead, hur	ting self or hurting others? Yes No				
Indicators Unab	le to Assess	1 (low)	2 (moderate)	3 (high)				
		 Score ≥ 3 on Emotional Health Screen 	 Score 1-2 on Emotional Health Screen 	 Score 0 on emotional health screen 				
11a: Psychosocial Unat	ble to Assess	 Responds positively to Full Screen 	 Some knowledge of PPD 					
or mental health		 No Knowledge of PPD 	 Some changes in appetite, sleep, energy 	 Knowledge of PPD 				
issues including		 Changes in appetite, sleep, energy or 	or activity, but no major impact on ADL	 No changes in appetite, sleep, energy or 				
post partum		activity that impact ADL	 Hx of depression – treated professionally 	activity level except as related to normal				
depression			 No past hospitalization 	PP changes				

11b: Maternal	Unable to Assess	 Hx of depression or hospitalization Current use of antidepressants Current or Hx of suicide or expression of wanting to hurt others Positive response to #3 on Emotional Health Screen 	 Past use of antidepressants Hx of suicidal ideationtreated professionally Negative response to #3 on Emotional Health Screen 	 No current or past Hx of depression No past hospitalizations No Hx/current use of antidepressant No Hx/current suicidal ideation or expressions of wanting to hurt others Negative Response to #3 on Emotional Health Screen
Stress and Anxiety		 Physical or emotional stress – feeling overwhelmed Current unhealthy coping mechanism (drugs, unsafe sex, excessive food, tobacco use, uncontrolled anger/violence, rage) 	 Some physical or emotional symptoms indicating stress Hx of poor coping strategies but recognizes/sought professional help 	 No physical or emotional symptoms indicating stress response Current healthy coping strategies Avoids unhealthy coping mechanisms (drugs, unsafe sex, excessive food, tobacco, violence)
11c: Trauma and Loss	Unable to Assess	 Current trauma or loss Poor coping in response to trauma or loss Hx/Current abuse (sexual, physical, verbal) not addressed Witnessed violence 	Hx/Current trauma/loss-sought professional help Hx of poor coping in response to trauma/loss-sought professional help Hx of abuse (sexual, physical, verbal)-professional help sought Witnessed violence-professional help sought	 No Hx of trauma or loss Healthy coping in response to trauma or loss No Hx of abuse (sexual, physical, verbal) No violence witnessed
11d: Self Concept/Self Perception	Unable to Assess	 Poor sense of self/ low self-esteem Negative impact of parenthood on lifestyle 	Hx of low self-esteem Some negative impact of parenthood on lifestyle but positive impact outweighs negative impact	 Positive sense of self Positive impact of parenthood on lifestyle
11e: Relationships	Unable to Assess	 Feels isolated from people, agencies, services or unable to access help with physical, emotional and social needs Feeling alienated/isolated from partner, family, and/or friends 	 Identifies people, agencies, services for help with physical, emotional and social needs; not always accessed Relationship with partner, family and/or friends is sometimes strained 	 Identifies people, agencies, services for help with physical, emotional and social needs Communicative, supportive and close relationship with partner, family & friends
	USE C	LINICAL JUDGEMENT BASED ON ASSESSME	NT OF INDICATORS AND COPING STRATEGIE	S USED
Overall Emotional Health Level of Strength	Unable to Assess	1 (low)	2 (moderate)	3 (high)

		KAA#12: Hea	thy Parenting					
Level of Strength								
Indicators Unable to Assess 1 (low) 2 (moderate) 3								
12a: Parent's Transition to Parenting	Unable to Assess	 Has unrealistic expectations of baby's care needs Unable to make necessary lifestyle changes/ adaptations to meet baby's needs Negative statements about own ability to parent Negative perception of parenting Inadequate nutrition and minimal rest to care for baby Barriers to learning about parenting, child 	 Uncertain expectations of baby's care needs Inconsistently makes necessary lifestyle changes/adaptations to meet baby's needs Lacks confidence in ability to parent Some ambivalence of parenting Inconsistent nutrition and sporadic rest to care for baby Some barriers to learning about parenting, child development, nurturing, 	 Realistic expectations of baby's care needs Able to make necessary lifestyle changes/adaptations to meet baby's needs Positive statements about ability to parent Positive perception of parenting Adequate nutrition and rest to care for baby No barriers to learning more about 				

		development, nurturing, and bonding	and bonding	parenting, child development, nurturing, and bonding
12b: Parent-Baby Attachment	Unable to Assess	 Early bonding experiences were negative/abusive Lethargic, withdrawn baby Barriers to accurately interpreting baby's signals and cues 	 Early bonding experiences were indistinct Baby inconsistently alert/responsive Difficulty with accurately interpreting baby's signals and cues 	 Early bonding experiences were positive Alert, responsive baby Accurately interprets baby's signals and cues
	USE CL	INICAL JUDGEMENT BASED ON ASSESSMEN	IT OF INDICATORS AND COPING STRATEGIE	S USED
Overall Healthy Parenting Level of Strength	Unable to Assess	1 (low)	2 (moderate)	3 (high)
Additional Comment	s:			

KAA#13: Neonatal and Developmental Assessment							
	Level of Strength						
	USE CLINICAL JUDGEMENT BASED ON ASSESSMENT OF INDICATORS AND COPING STRATEGIES USED						
Overall Neonatal and Unable to Assess 1 (low) 2 (moderate) 3 (high) Developmental Assessment Level of Strength							
Tool Used:	Tool Used:						

			KAA	\#14: Medi	cal History a	and Physical Ass	sessment			
Age:	GR:		P:	EDC:	Height:	Weight:		If Indicated:	B/P:	HR:
RR:	Temp:	Allergies:		Current Me	edications:	CAD	HTN		Diabetes	
Seizures		Asthma	Urinary	Anen	nia/Coag	Thyroid	d Dx	Osteo	porosis	
Mental Illnes	ss Surgerie	es	Cancers (Breast, C	Ovarian, Col	on)	Ris	sk: Average?		Last CBE	
Last Mammo	ogram	Birth D	Defects/Genetic Susceptib	ility	Diet	BC Plan	s	Any Ris	sk Factors	
Skin: NP (Ca	ap refill/Temp/	Turgur WNL) Ede	ema lesions erythema pro	uritus GI : N	NP(Adequate A	appetite ,Appropriate	wt. Gain) A	norexia Nause	ea Vomitin	g Constipation
GU: NP,	Burning	Frequency	Incont. Painful Colo	r Clarity						
Postpartum	Maternal: C	-Section: N/A NP	(Healing well) Erythema	a Drainage	Painful E	Episiotomy: N/A NP	(Healing well)	Erythema	Drainag	e Painful
Breasts: NP	Supportive Bra	as Engorged Ery	thema Painful Cracked R	tepro: Lochia	: Rubra (1-4),	Serosa(5-7), Alba(1	I-3wks), inc. o	discharge, Odor	, Bleeding (frank red bld) Concerns:
2 – 12 month	ns Postpartur	m: Repro: NP, i	ncreased or changed discha	arge, odor	Postpartum	F/U complete:	Contrace	ption Method v	v/o probs	
Infant Assessment: Weight gain since birth Normal/At-risk AHR: murmurs noted: RR: Temp (if ind): General appearance: WNL Tone: WNL Reflexes: Skin: NP Well Hydrated Cap refill/Temp/Turgur: WNL Umbilicus: N/A NP(Healing well) Erythema Drainage Edema Circumcision: N/A NP(Healing well) Erythema Drainage Edema GI: NP (Adequate appetite, Adequate wt gain) Colicy, Vomiting, Constipation, Jaundice GU: Voiding WNL: Stool WNL: Risk factors for sensorineural hearing impairment?										
			CLINICAL JUDGEMENT	BASED ON					SUSED	
Overall Phy		ment Level of	Unable to Assess		1 (lo	ow)	2	(moderate)		3 (high)
	Strength									